



NAMI
Helena

554 Toole Court
Helena, MT 59602
406-458-9738

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Health and Human Services

**LEGISLATIVE
FISCAL ANALYST**

Chairman Roberts
Members of the Committee

Re: Drop-In Centers

I have had time to think about my response to Representative Robert's question last week on the validity of Drop-In Centers in Montana. I continue to believe Drop-In Centers are the most efficient way services can be delivered for individuals who suffer from mental illnesses, but I would like to expand on my response.

Being in Montana's public mental illness treatment system for almost 27 years I have come to several conclusions. First, almost all individuals suffering from severe, disabling mental illnesses have a co-occurring anxiety disorder. In order to protect themselves from the slings and arrows of discrimination and stigma most tend to isolate themselves.

For decades the mental illness treatment system has tended to be authoritarian, maternalistic or paternalistic. Rarely have those living with mental illnesses been allowed to participate in their treatment other than follow the treatment plan dictated by providers. Concepts of shared decision making and collaboration are relatively new to the treatment system.

What Drop-In Centers do is to provide an opportunity for people living with a mental illness to live and participate in the community on their own terms. Socialization skills along with appropriate medication and teaching an individual to live with his/her mental illness are the three-legged stool necessary to support Recovery.

Participation in a Drop-In Center allows an individual to participate in their individual Recovery, learn that they are not alone in their condition and remove the isolation which is so detrimental to Recovery.

Of all the priorities, I personally feel the funding for Drop-In Centers may be the most efficient way to provide successful treatment for individuals suffering from severe mental illnesses.

Dr. Gary Mihelish, President
NAMI-Helena